	n the invention entitled _	RETROREFLECTIVE MATI		
as Application Serial I hereby state that claims, as amended material to the exare hereby claim foreign	al Noa I have reviewed and un by any amendment(s) r mination of this applical	eferred to above. I acknowledg tion in accordance with Title 37	ed through) (if approve-identified specification, include the duty to disclose information, Code of Federal Regulations, § 119 of any foreign application(s)	n which is 1.56(a). I
Prior Foreig	n Application(s)			
			Priority	Claimed
9921394.4	Great Britain	10 September 1	999 XX	
(Number)	(Country)	(Day/Month/Year Filed)	Yes	No
9921618.6	Great Britain	14 September 19	99 XX-1	(1)
Number)	(Country)	(Day/Month/Year Filed)	Yes	No
0013203.5	Great Britain	1 June 2000	хж	
Number)	(Country)	(Day/Month/Year Filed)	Yes	No
0017672.7	Great Britain	20 July 2000	XX)	
(Number)	(Country)	(Day/Month/Year Filed)	Yes	·No
PCT/GB00/00	0062 PCT	12 January 2000) X X 1	_
(Number)	(Country)	(Day/Month/Year Filed)	Yes	□ No
(Number)	(Country)	(,···		
		(D., M.,, (V, Fil. I)	Yes	□ No
(Number)	(Country)	(Day/Month/Year Filed)		140
pelow and, insofar States application in the duty to disclose	as the subject matter of the manner provided b material information as	f each of the claims of this app by the first paragraph of Title 3: defined in Title 37, Code of Fe	0 of any United States application is not disclosed in the pr 5, United States Code, §112, I aclederal Regulations, §1.56(a) which international filing date of this approximate the second states of	ior United (nowledge 1 occurred
(Application Serial No.)		(Filing Date)	(Status - Patented, Pending or	Abandoned
F - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	•		131	
		(Filing Date)	(Status — Patented, Pending or	A

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

POWER OF ATTORNEY

I(we) hereby appoint Charles E. Baxley, Registration No. 20,149, whose post office address is: Hart, Baxley, Daniels & Holton, 59 John Street, Fifth Floor, New York, New York 10038, telephone (212)791-7200), as my (our)attorney with full power of substitution and revocation, to prosecute this application, and to transact all business in the Patent and Trademark Office connected therewith.

Full Name of First or Sole Inventor Brian Sagar	Citizenship Great Britain
RESIDENCE Address - Street The Cottage, 42 Moseley	POST OFFICE Address - Street The Cottage, 42 Mosel
Rd., Cheadle Hulme, Cheadle	Rd., Cheadle Hulme, Cheadle
City (Zip)	City (Zip)
Cheshire SK8 5HJ	Cheshire SK8 5HJ
State or Country	State or Country
Great Britain	Great Britain
Date	Signature

Second Joint Inventor, if any	Citizenship
Peter A. White	Great Britain
RESIDENCE Address — Street	POST OFFICE Address — Street
The White House, Booth Road, Bowdon	The White House Booth Road Bowdon
City (Zip)	City (Zip)
Cheshire WA144AU	Cheshire WA144AU
State or Country	State or Country
Great Britain	Great Britain
Date .	Signature
	r

Third Joint Inventor, if any	Citizenship
RESIDENCE Address — Street	POST OFFICE Address — Street
City (Zip)	City (Zip)
State or Country	State or Country
Date	Signature
r	

Fourth Joint Inventor, if any	Citizenship
RESIDENCE Address — Street	POST OFFICE Address — Street
City (Zip)	City (Zip)
State or Country	State or Country
Date	Signature
•	P

Fifth Joint Inventor, if any	Citizenship
RESIDENCE Address — Street	POST OFFICE Address — Street
City (Zip)	City (Zip)
State or Country	State or Country
Date	Signature

Sixth Joint Inventor, if any	Citizenship
RESIDENCE Address — Street	POST OFFICE Address — Street
City (Zip)	City (Zip)
State or Country	State or Country
Date	Signature

Seventh Joint Inventor, if any	Citizenship
RESIDENCE Address — Street	POST OFFICE Address — Street
City (Zip)	City (Zip)
State or Country	State or Country
Date	Signature
<i>v</i>	